Only

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STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 × COMMITTEE (in full) is changed) over the lines. Great America PAC 107 S West St ADDRESS (number and street) Suite 555 (Check if address is changed) Alexandria 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS dbacker@dbcapitolstrategies.com (Check if address is changed) Optional Second E-Mail Address kristin@dbcapitolstrategies.com COMMITTEE'S WEB PAGE ADDRESS (URL) http://www.greatamericapac.com (Check if address is changed) DATE 2016 C00608489 FEC IDENTIFICATION NUMBER > 3. X IS THIS STATEMENT NEW (N) OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Dan Backer Type or Print Name of Treasurer Dan Backer [Electronically Filed] 03 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530

Local 202-694-1100

| FEC <b>Fo</b>                  | rm 1 (Revised 02/2009)  | Page <b>2</b>             |  |  |
|--------------------------------|---|---------------------------|--|--|
| TYPE OF C                      |   | <u>-</u>                  |  |  |
| (a)                            | This committee is a principal campaign committee. (Complete the candidate information below   | )                         |  |  |
| (b)                            | This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)   |                           |  |  |
| Name of<br>Candidate           |   |                           |  |  |
| Candidate<br>Party Affiliation | Office Sought: House Senate President   | State                     |  |  |
| (c)                            | This committee supports/opposes only one candidate, and is NOT an authorized committee.   |                           |  |  |
| Name of Candidate              |   |                           |  |  |
| Party Con                      | nmittee:  (National, State  | (Democratic,              |  |  |
| (d)                            | This committee is a or subordinate) committee of the  | Republican, etc.) Party   |  |  |
| Political A                    | ction Committee (PAC):  |                           |  |  |
| (e)                            | This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co   | nnected organization is a |  |  |
|                                | Corporation Corporation w/o Capital Stock   | Labor Organization        |  |  |
|                                | Membership Organization Trade Association   | Cooperative               |  |  |
|                                | In addition, this committee is a Lobbyist/Registrant PAC.   |                           |  |  |
| (f)                            | (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregate committee. (i.e., nonconnected committee)  |                           |  |  |
|                                | In addition, this committee is a Lobbyist/Registrant PAC.   |                           |  |  |
|                                | In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)  |                           |  |  |
| Joint Fund                     | raising Representative:   |                           |  |  |
| (g)                            | This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, at least one of which is an authorized committee of a federal candidate |                           |  |  |
| (h)                            | This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.        |                           |  |  |
| Com                            | mittees Participating in Joint Fundraiser   |                           |  |  |
| 1.                             | FEC ID number   |                           |  |  |
| 0                              |   |                           |  |  |
| 2.                             |   |                           |  |  |
| 3.                             | FEC ID number C   |                           |  |  |

| FEC Form 1 (Revised 02  | /2009)   | <br>  Page <b>3</b>    |
|---|--|------------------------|
| Write or Type Committee Name  | ·  | - <del>-</del>         |
| Great America F   | PAC  |                        |
|   | ganization, Affiliated Committee, Joint Fundraising Representative, or Leader                    | ship PAC Sponsor       |
| NONE  |  | -                      |
|   |  |                        |
|   |  |                        |
| Mailing Address   |  |                        |
|   |  |                        |
|   |  |                        |
|   | CITY STATE   | ZIP CODE               |
| Relationship: Connected   | Organization Affiliated Committee Joint Fundraising Representative Le                            | eadership PAC Sponsor  |
| <ol> <li>Custodian of Records: Identi<br/>books and records.</li> </ol> | fy by name, address (phone number optional) and position of the person in po                     | essession of committee |
| Kristin Howa  | ard  |                        |
|   | 203 S Union St   |                        |
| Mailing Address   | Suite 300  |                        |
|   | Alexandria , VA , 22314  |                        |
|   |  |                        |
| Title or Position   | CITY STATE   | ZIP CODE               |
| Assistant Treasurer   |  | 882 9731               |
| 8. <b>Treasurer:</b> List the name and any designated agent (e.g., as   | address (phone number optional) of the treasurer of the committee; and the nasistant treasurer). | ame and address of     |
| Full Name Dan Backer  |  |                        |
| of Treasurer  | 203 S Union St   |                        |
| Mailing Address   | Suite 300  |                        |
| l   |  |                        |
|   | Alexandria VA 22314  CITY STATE  | ZIP CODE               |
| Title or Position Treasurer   | Telephone number   | 882 9731               |

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|---|--------------------------------|----------------|--|--|--|
|   |                                |                |  |  |  |
| Full Name of<br>Designated<br>Agent   | Kristin Howard                 |                |  |  |  |
| Mailing Address   | 203 S Union St                 |                |  |  |  |
|   | Suite 300                      |                |  |  |  |
|   | Alexandria VA 22314 CITY STATE | ZIP CODE       |  |  |  |
| Title or Position Assistant Treasur   | rer Telephone number 571       | 882   -   9731 |  |  |  |
| Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.  Name of Bank, Depository, etc. |                                |                |  |  |  |
| Į   | Access National Bank           |                |  |  |  |
| Mailing Address   | 4221 Walney Road               |                |  |  |  |
|   | Suite 120                      |                |  |  |  |
|   | Chantilly VA 20151             |                |  |  |  |
|   | CITY STATE                     | ZIP CODE       |  |  |  |
| Name of Bank, De  | epository, etc.                |                |  |  |  |
| Į   |                                |                |  |  |  |
| Mailing Address   |                                |                |  |  |  |
|   |                                |                |  |  |  |
|   |                                |                |  |  |  |
|   | CITY STATE                     | ZIP CODE       |  |  |  |

## : 97 A = G7 9 @ 5 B9 CI G'H9 LHF9 @ 5 H98 'HC' 5 F9 DCFHz G7 < 98 I @ 'CF' ± H9 A ± N5 H± CB

Form/Schedule: F1A Transaction ID:

(Prior memo text) Consistent with 11 CFR 102.1(d) and 11 CFR 100.5, this political committee is filing this form within 10 days after receiving contributions or making expenditures in connection with a federal election aggregating in excess of \$1,000 during a calendar year. Consistent with the stipulated judgment in Carey v. FEC, this committee intends to establish a separate bank account (a Carey Account) to deposit and withdraw funds raised in unlimited amounts from individuals, corporations, labor organizations, and/or other political committees (Carey Contributions). The Carey Contributions maintained in this Carey account will not be used to make contributions, whether direct, inkind, or via coordinated communications, or coordinated expenditures, to federal candidates or committees. This committee intends to file monthly. This commmittee has previously filed independent expenditures identified as FEC-1041979 and FEC-1042445

Form/Schedule: Transaction ID:

## FORM 1S -STATEMENT OF ORGANIZATION (Supplemental Page)

FEC Form 1G (Revised 06/2011) Page List all banks or other depositories in which the committee deposits funds, holds accounts, rents Banks or Other Depositories: safety deposit boxes or maintains funds. [ ADDITIONAL ] Name of Bank, Depository, etc. Mailing Address CITY 🗖 ZIP CODE 🛕 STATE **△** [ ADDITIONAL ] Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor Mailing Address **CITY** STATE . ZIP CODE Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor [ADDITIONAL] **Designated Agent** Eric Beach Full Name 107 S. West St Mailing Address Suite 555 Alexandria VA 22314 Title or Position CITY # **STATE** ZIP CODE Chairman 571 Telephone number [ ADDITIONAL ] Joint Fundraiser Participant FEC ID number